State of Idaho Department of Water Resources

APPLICATION FOR CERTIFICATION AS A WATER RIGHT EXAMINER

1.	Name:		Phone No	_
	Firm Name, if applicable:			
2.				_
3.	I hold a valid license as an: 9	Engineer ⁹ Geologist		-
4.	Idaho registration number (PE	or PG):		
5.	Summarize your experience in	n the measurement of the flow	v of water and list the types of measuring equipment	or
	devices you have used. (Atta	ch additional pages if necessa	ary.)	
6.	Summarize appurtenant educ	ation and course work to show	w you know the principles of fluid flow and hydrology	
	(Attach additional pages if nec	essary.)		
7.	Are you familiar with the requi	rements of Chapters 1 & 2, Ti	tle 42, Idaho Code? 9 Yes or 9 No	
8.	Are you familiar with requirements of the Beneficial Use Examination Rules adopted on July 1, 1993? 9 Yes or 9 No			
l her	eby certify that the information	given on this form is true a	nd correct.	
Signa	Signature and Seal		Date	-
		DO NOT WRITE BELOW	/ THIS LINE	
\$200	.00 FEE Receipted by:	Date:	Receipt No	_
Appr	rove ⁹ Deny ⁹		Date:	_